## ILLINOIS COMMERCE COMMISSION CROSSING SAFETY IMPROVEMENT PROGRAM

## GRADE CROSSING PROTECTION FUND PROJECT INFORMATION

Public Highway/Rail Bridge Projects

I.	General Information
	Applicant Type: City Village Town County Township Railroad
	Resubmission: Yes No Company Name:
	Applicant Name: Population:
	Chief Elected Official: Little:
	Business Address:
	City: State: Zip:
	Business Phone: Business Fax:
	Email Address (if applicable):
	State Legislative District:
II.	Project Administrator
II.	Project Administrator Contact Person: Title:
	Company: Title:
	Company:
	Address:  City: State: Zip:  Business Phone: Business Fax:
	Business Phone: Business Fax:
	Email Address (if applicable):
	(Note: Attach separate sheet listing all crossings if applying for more than one crossing improvement)  County: In City Near City City:  Street / Roadway Name:  Railroad: Crossing Number: Railroad Milepost:
	Average Daily Traffic (ADT): Daily Train Traffic: (Number of Trains per Day)
	(Number of Cars per Day over the Crossing) (Number of Trains per Day)
	Number of School Buses over Crossing per Day:  Do vehicles carrying hazardous materials use crossing:   Yes  No
	If yes, list the type and approximate number of hazardous material vehicles per day:
	in yes, list the type and approximate number of hazardous material vehicles per day.
	Number of tracks through crossing:
	Distance to and street name of the two nearest existing grade separations from location being applied for:
	Crossing is currently: A grade Separation An at-grade crossing No crossing  If crossing is currently an at-grade crossing, mark the existing warning devices at crossing  None Stop signs only Crossbucks only  Automatic flashing light signals Automatic flashing light signals with gates
	Center median or median barriers Other (please specify)
	Are railroad signals interconnected with traffic signals at this location: Yes No N/A
	If crossing is currently a grade separation, provide the following information:
	☐ Highway over railroad ☐ Highway under railroad
	Number of traffic lanes Width of pavement
	Vertical clearance

## IV. Project Location Map and/or Photographs

A project location map shall be included in the application. The project location map should show the crossing(s) for which application is being made, as well as any other improvements that are being submitted in conjunction with this application. If project is a part of a "corridor" project, indicate the limits of the entire "corridor" on the map. Paper size shall not exceed 11 x 17 inches. If the bridge will replace a grade crossing, please provide a photograph of the existing crossing. If the new structure will replace an existing bridge, please provide a photograph of the existing structure.

V.	Project Summary.  Application to (check all that apply):  Reconstruct existing grade separation Close adjacent crossing Other (please specify)  Construct a new grade separation Increase vertical clearance at highway underpass
	Is application for: Design only Construction only Design and construction
	Is application part of a larger "corridor" project:
	Use the space below to provide a narrative of the proposed project. Items to include in this section are extenuating circumstances unique to this crossing, such as heavier seasonal traffic, visibility restrictions caused by trees, buildings, etc., proximity of schools and public buildings, etc., which explain why this crossing should be funded. Explain any work to by done by the local agency, such as roadway improvements in the immediate vicinity of the grade separation project. Approximate costs should be listed for each item of work to be done.
VI.	Evidence of Community Effort and Support  Any preliminary engineering or planning studies, along with cost estimates, that have been prepared for this project should be included with your application. List any past efforts to improve safety at railroad crossings within applicant's jurisdiction. If any studies have been done regarding railroad crossing elimination or consolidation, include that information.

## VII. Financial Need

This narrative should justify the local government's need for GCPF assistance. One copy of

Project Schedule Provide information on when this project is anticipated to commence, or when improvement should be implemented. Give an approximate timeline listing key milestones concerning the design and/or construction phases of the project.  ———————————————————————————————————		government agencies only). 
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